

PATENT APPLICATION
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In reissue Application of:

Aaron I. VINIK et al.

Serial No.: 09/709,585

Filed: November 13, 2000

For: INGAP PROTEIN INVOLVED IN
PANCREATIC ISLET NEOGENESIS

Group Art Unit: 1653

Examiner: K. Carlson

Confirmation No. 4730

Atty. Dkt. No. 005126.00002

SUBMISSION OF SUPPLEMENTAL REISSUE DECLARATIONS

Via Facsimile

(571-273-0100)

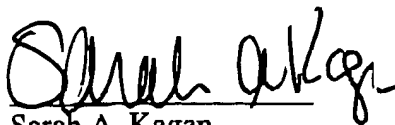
Office of Patent Legal Administration

Commissioner of Patents
c/o Customer Service Window
Randolph Building
401 Dulany Street
Alexandria, VA 22314

Sir:

In response to the request of Ms. Terry Dey, Applicants enclose a Supplemental Reissue Declaration which relates to all corrections made in the reissue application and prosecution.

Respectfully submitted,



Sarah A. Kagan

Registration No. 32,141

Dated: July 11, 2006

Customer No. 22907
Banner & Witcoff, LTD.

PTO/SB/61 (10-05)

Approved for use through 04/30/2007. OMB 0651-0033

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optical)

005126.00002

I hereby declare that:

Each inventor's residence, mailing address and citizenship are stated below next to their name.

I believe the inventors named below to be the original and first inventor(s) of the subject matter which is described and claimed in patent number 5,834,590, granted November 10, 1998 and for which areissue patent is sought on the invention entitled INGAP PROTEIN INVOLVED IN
PANCREATIC ISLET NEOGENESIS

the specification of which

☐ is attached hereto.☒ was filed on November 13, 2000 as reissue application number 09/709,585and was amended on November 13, 2000, October 3, 2001; December 17, 2003,
(if applicable) September 3, 2004, and November 30, 2004

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

☐ I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/02B (or equivalent) listing the foreign applications.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.☐ by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

Claim 3 as issued reads on full length INGAP without any purity requirements.

The claim could have been interpreted to read on natural sources of INGAP.

Page 1 of 3

This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/51 (10-05)

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Pocket Number (Optional)

005126.00002

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.

Note: To appoint a power of attorney, use form PTO/SB/81.

Correspondence Address: Direct all communications about the application to:



The address associated with Customer Number:

22907

OR

☐ Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Email

WARNING:

Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identity theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(e) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)

Aaron I. VINIK

Inventor's signature

Date

Residence

Norfolk, Virginia

Citizenship

United States

Mailing Address

40 Radar Street #603, Norfolk, VA 23510

Full name of second joint inventor (given name, family name)

Gary L. PITTENGER

Inventor's signature

Date

Residence

Virginia Beach, Virginia

Citizenship

United States

Mailing Address

3701 Prince Andrew Lane, Virginia Beach, Virginia 23452

☒ Additional joint inventors or legal representative(s) are named on separately numbered sheets forms PTO/SB/02A or 02LF attached hereto.

PTO/SB/02A (09-04)

Approved for use through 07/31/2009. OMB 0551-0002

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ronit R.		PHAIL	
Inventor's Signature		Date	
Indianapolis	Indiana	USA	United States
Residence: City	State	Country	Citizenship
5862 Carvel Ave.			
Mailing Address			
City Indianapolis	State Indiana	Zip 46220	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Lawrence		ROSENBERG	
Inventor's Signature		Date	
Montreal	Quebec	Canada	Canadian
Residence: City	State	Country	Citizenship
6507 Fern Road			
Mailing Address			
City Montreal	State	Zip H4V1E4	Country Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jean T. S., Legal Representative		DUGUID	
Inventor's Signature <i>Jean T. S. Duguid</i>		Date <i>9th June 2006</i>	
Beaconsfield	Prov. Quebec	Canada	Canadian
Residence: City	State	Country	Citizenship
574 Rd Chester			
Mailing Address			
City Beaconsfield	State Prov. Quebec	Zip H9W 3K1	Country Canada

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

PTO/SB/51 (10-05)

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REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

005126.000C2

I hereby declare that:

Each inventor's residence, mailing address and citizenship are stated below next to their name.

I believe the inventors named below to be the original and first inventor(s) of the subject matter which is described and claimed in patent number 5,834,590 granted November 10, 1998 and for which a reissue patent is sought on the invention entitled INGAP PROTEIN INVOLVED INPANCREATIC ISLET NEOGENESIS

the specification of which

☐ is attached hereto.☒ was filed on November 13, 2000 as reissue application number 09/709,585and was amended on November 13, 2000, October 3, 2001; December 7, 2003,
(if applicable) September 3, 2004, and November 30, 2004

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

☐ I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/02B (or equivalent) listing the foreign applications.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.☐ by reason of other errors.

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)		Docket Number (Optional) 005125.00002	
All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.			
Note: To appoint a power of attorney, use form PTO/SB/81.			
Correspondence Address: Direct all communications about the application to:			
<input type="checkbox"/> The address associated with Customer Number:		22907	
OR			
<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone		Email	
<p align="center">WARNING:</p> <p>Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identity theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.</p> <p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.</p>			
Full name of sole or first inventor (given name, family name) Aaron I. VINIK			
Inventor's signature		Date	
Residence Norfolk, Virginia		Citizenship United States	
Mailing Address 40 Radar Street #603, Norfolk, VA 23510			
Full name of second joint inventor (given name, family name) Gary L. PITTENGER			
Inventor's signature		Date	
Residence Virginia Beach, Virginia		Citizenship United States	
Mailing Address 3701 Prince Andrew Lane			
<input checked="" type="checkbox"/> Additional joint inventors or legal representative(s) are named on separately numbered sheets forms PTO/SB/02A or 02LR attached hereto.			


PTO/SB/02A (09-04)

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
Page <u>3</u> of <u>3</u>	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ronit R.		PHAIL	
Inventor's Signature 		Date <u>5/23/06</u>	
Indianapolis <small>Residence: City</small>	Indiana <small>State</small>	USA <small>Country</small>	United States <small>Citizenship</small>
5862 Carvel Ave. <small>Mailing Address</small>			
City Indianapolis	State Indiana	Zip 46220	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Lawrence		ROSENBERG	
Inventor's Signature		Date	
Montreal <small>Residence: City</small>	Quebec <small>State</small>	Canada <small>Country</small>	Canadian <small>Citizenship</small>
6507 Fern Road <small>Mailing Address</small>			
City Montreal	State	Zip H4V1E4	Country Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jean T. S., Legal Representative		DUGUID	
Inventor's Signature		Date	
Quebec <small>Residence: City</small>	State	Canada <small>Country</small>	Canadian <small>Citizenship</small>
574 Rd Chester Beconsfield <small>Mailing Address</small>			
City Quebec	State	Zip H9W 3K1	Country Canada

This collection of information is required by 35 U.S.C. 116 and 37 CFR 1.83. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

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Correspondence Address: Direct all communications about the application to:			
<input type="checkbox"/> The address associated with Customer Number:		22907	
OR			
<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Email		
<p align="center">WARNING:</p> <p>Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identity theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.</p> <p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.</p>			
Full name of sole or first inventor (given name, family name) Aaron L. VINIK			
Inventor's signature		Date	
Residence Norfolk, Virginia		Citizenship United States	
Mailing Address 40 Radar Street #603, Norfolk, VA 23510			
Full name of second joint inventor (given name, family name) Gary L. PITTEGER			
Inventor's signature		Date	
Residence Virginia Beach, Virginia		Citizenship United States	
Mailing Address 3701 Prince Andrew Lane, Virginia Beach, Virginia 23452			
<input type="checkbox"/> Additional joint inventors or legal representative(s) are named on separately numbered sheets forms PTO/SB/02A or 02LR attached hereto.			

PTO/SB/02A (09-04)

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet	Page <u>3</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ronit R.		PHAIL	
Inventor's Signature		Date	
Indianapolis	Indiana	USA	United States
Residence: City	State	Country	Citizenship
5862 Carvel Ave.			
Mailing Address			
City	State	Zip	Country
Indianapolis	Indiana	46220	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Lawrence		ROSENBERG	
Inventor's Signature		Date	
Montreal	Quebec	Canada	Canadian
Residence: City	State	Country	Citizenship
6507 Fern Road			
Mailing Address			
City	State	Zip	Country
Montreal		H4V1E4	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jean T. S. (Legal Representative)		DUGUID	
Inventor's Signature		Date	
<i>Jean T. S. Duguid</i>		10 th APRIL 2006	
Quebec	PROV. QUEBEC	Canada	Canadian
Residence: City	State	Country	Citizenship
574 Rd Chester Beaconsfield			
Mailing Address			
City	State	Zip	Country
Quebec	PROVINCE QUEBEC	H9W 3K1	Canada

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)

005126.00002

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.

Note: To appoint a power of attorney, use form PTO/SB/81.

Correspondence Address: Direct all communications about the application to:

☐ The address associated with Customer Number: 22907

OR

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Individual Name

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)

Aaron I. VINIK

Inventor's signature

Date

Residence

Norfolk, Virginia

Citizenship

United States

Mailing Address

40 Radar Street #603, Norfolk, VA 23510

Full name of second joint inventor (given name, family name)

Gary L. PITTENGER

Inventor's signature

Date

Residence

Virginia Beach, Virginia

Citizenship

United States

Mailing Address

3701 Prince Andrew Lane, Virginia Beach, Virginia 23452

☐ Additional joint inventors or legal representative(s) are named on separately numbered sheets forms PTO/SB/02A or CLR attached hereto.

PTO/SB/02A (09-04)

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DECLARATION	ADDITIONAL INVENTOR(S)	Page <u>3</u> of <u>3</u>
	Supplemental Sheet	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ronit R.		PHAIL	
Inventor's Signature	Indiana	USA	United States
Residence: City	State	Country	Citizenship
5862 Carvel Ave.			
Mailing Address			
City Indianapolis	State Indiana	Zip 46220	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Lawrence		ROSENBERG	
Inventor's Signature	Quebec	Canada	Canadian
Residence: City	State	Country	Citizenship
6507 Fern Road			
Mailing Address			
City Montreal	State	Zip H4V1E4	Country Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jean T. S., Legal Representative		DUGUID	
Inventor's Signature	Quebec	Canada	Canadian
Residence: City	State	Country	Citizenship
574 Rd Chester Beconsfield			
Mailing Address			
City Quebec	State	Zip H9W 3K1	Country Canada

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REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

005126.00002

I hereby declare that:

Each inventor's residence, mailing address and citizenship are stated below next to their name.

I believe the inventors named below to be the original and first inventor(s) of the subject matter which is described and claimed in patent number 5,834,590 granted November 10, 1998 and for which areissue patent is sought on the invention entitled INGAP PROTEIN INVOLVED IN PANCREATIC ISLET NEOGENESIS

the specification of which

☐ is attached hereto.☒ was filed on November 13, 2000 as reissue application number 09/709,585and was amended on November 13, 2000, October 3, 2001, December 17, 2003,
(If applicable) September 3, 2004, and November 30, 2004

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

☐ I hereby claim foreign priority benefits under 35 U.S.C. 118(a)-(d) or (f), or 365(b). Attached is form PTO/SB/02B (or equivalent) listing the foreign applications.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.☐ by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

Claim 3 as issued reads on full length INGAP without any purity requirements.

The claim could have been interpreted to read on natural sources of INGAP.

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Page 1 of 3

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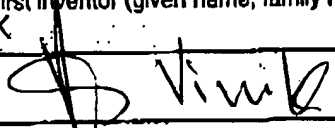
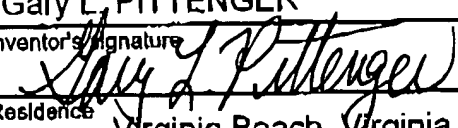
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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)		Clock Number (Optional) 005126.00002	
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Correspondence Address: Direct all communications about the application to:			
<input checked="" type="checkbox"/> The address associated with Customer Number:		22907	
OR			
<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Email		
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Full name of sole or first inventor (given name, family name) Aaron I. VINIK			
Inventor's signature 		Date 3-23-06	
Residence Norfolk, Virginia		Citizenship United States	
Mailing Address 40 Radar Street #603, Norfolk, VA 23510			
Full name of second joint inventor (given name, family name) Gary L. PITTENGER			
Inventor's signature 		Date 3/23/06	
Residence Virginia Beach, Virginia		Citizenship United States	
Mailing Address 3701 Prince Andrew Lane, Virginia Beach, Virginia 23452			
<input checked="" type="checkbox"/> Additional joint inventors or legal representative(s) are named on separately numbered sheets forms PTO/SB/02A or 02LR attached hereto.			

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ronit R.		PHAIL	
Inventor's Signature		Date	
Indianapolis	Indiana	USA	United States
Residence: City	State	Country	Citizenship
5862 Carvel Ave.			
Mailing Address			
City Indianapolis	State Indiana	Zip 46220	Country USA
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Lawrence		ROSENBERG	
Inventor's Signature		Date	
Montreal	Quebec	Canada	Canadian
Residence: City	State	Country	Citizenship
6507 Fern Road			
Mailing Address			
City Montreal	State	Zip H4V1E4	Country Canada
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jean T. S., Legal Representative		DUGUID	
Inventor's Signature		Date	
Quebec	State	Canada	Canadian
Residence: City	State	Country	Citizenship
574 Rd Chester Beconsfield			
Mailing Address			
City Quebec	State	Zip H9W 3K1	Country Canada

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